

1. Name of the person or organization: [REDACTED]
2. Address: [REDACTED]
3. City: [REDACTED] State: [REDACTED] Zip: [REDACTED]
4. Date: [REDACTED]
5. Subject: [REDACTED]
6. Reference: [REDACTED]
7. Remarks: [REDACTED]
8. Signature: [REDACTED]
9. Title: [REDACTED]
10. Organization: [REDACTED]
11. Phone: [REDACTED]
12. Fax: [REDACTED]
13. E-mail: [REDACTED]
14. Other: [REDACTED]
15. Comments: [REDACTED]

Brian R. Gordon

1743

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| ✓ | Rejected |
| ✗ | Allowed |

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| - | (Through numeral) Cancelled |
| + | Restricted |

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| N | Non-Elected |
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| A | Appeal |
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| Final | Claim | Date |
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